

FORM LM-30 ABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No 1215-0188 Expires 11-30-2006

This report is mandatory under P L 86-257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U 9034	2 Fiscal Year Covered From
	1 / 1 / 2004 Through 12 / 31 / 2004
3 Name and address of person filing	4 Name file number and address of labor organization
Name Thomas L Merritt	Name Teamsters Local 688
	Labor Organization File Number 025-471
PO Box, Bldg Room No If any Ste 210	P O Box, Building and Room Number if any
Street 300 S Grand Ave	Street 300 S Grand Ave
City St Louis	City St Louis
State Missouri ZIP Code + 4 63103	State Missouri ZIP Code + 4 63103
5 Position in labor organization Business Representative	
Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions) A Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent 6 Name and address of Employee fireducing trade name if any). 7.8 Nature of interest, Transaction or income	
6 Name and address of Employer (including trade name if any) Name	
Trade Name if any	
PO Box, Bldg Room No If any	7 b Amount.
Street	7 B Amount
Crty	
State ZIP Code + 4	
Signature	
15 Signature and verification. The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true correct, and complete. (See the section on penalties in the instructions.)	
Signed Thou I Keen I	On 08/12/2005 314-658-5747
	Date Telephone Number
Form I M 30 (2003)	

Name rson Filing Thomas Merritt	File Number U-	
B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested		
8 Name and address of Business (including trade name if any) Name Spector \$ Wolfe L L C Trade Name if any Attorneys At Law PO Box, Sidg Room No if any Ste 101 Street 206 Argonne City Kirkwood State Missouri ZIP Code +4 63122	9 Business deals with	
10 If 9 b or 9 c is checked give trust or employer's name Name Trade Name if any:	11 a Nature of such dealing Attorney provides legal services for Teamsters Local 688	
P O Box Bidg Room No. if any Street City State ZIP Code + 4	11 b Approximate dollar value of such dealing FEE FOR SERVICE 12 a Nature of interest held or income received Christmas Gift-One (1) Box of Steaks	
	12 b Amount. \$48	
C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value		
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)	14 a Nature of payment	
Name		
P O Box, Bldg Room No If any		
Street City		
State ZIP Code + 4		
13 b Is the Business an Employer or Consultant 7	14 b Amount of payment	